

# Crèche Enrolment Form



Parent/Guardian Details 1				Membership Number:			
Title	First Name		Surname				
Address							
Email							
DOB	/	/	Phone		Mobile		

Parent/Guardian Details 2				Membership Number:			
Title	First Name		Surname				
Address							
Email							
DOB	/	/	Phone		Mobile		

Child/children's Details									
<i>If you are a family gold member, please nominate x2 children for the creche inclusion</i>									
	First Name	Surname	Family Gold		Date of Birth		Gender		
1					/	/	M	F	
2					/	/	M	F	
3					/	/	M	F	
4					/	/	M	F	
5					/	/	M	F	

Emergency Contact Details (please provide <u>in addition to parent/guardian</u> – as one may be unavailable)		
Name	Phone	
Address	Relationship to child	

Important / Medical Information		
Please provide details of any information regarding any medical or physical conditions pertaining to your child/children. This may include but not limited to allergies, anaphylaxis, ADD, epilepsy, asthma, court orders etc.. (Please supply a copy of documents such as court orders, allergy plans, sign language etc..) <u>Please tick if n/a is not applicable.</u>		
n/a	Medical Information	Action Required
Child 1		
Child 2		
Child 3		
Child 4		
Child 5		

Parent Statement	
<p>I accept :</p> <ul style="list-style-type: none"> <li>• I have read and agree to the provisions detailed in the Crèche Parenting Handbook.</li> <li>• I must stay within the facility (inside the building) while my child/children attend the crèche.</li> <li>• My child/children can attend programs on the indoor courts in Wanangkura Stadium (Kiddo, Playgroup Sessions, etc.).</li> <li>• Photos may be taken of my child/children whilst participating in activities, and I agree to the photos being used as described in the Crèche Parenting Handbook.</li> <li>• I have discussed the immunisation status of my child/children on enrolment.</li> <li>• Only the adults listed above have approval to collect my child/children.</li> <li>• Only children ages 8 weeks – 11 years of age are permitted entry into the crèche.</li> <li>• I am allowing authorisation for the drop off and/or collection of my child/children to those stated above.</li> <li>• I will not bring my child/children to the crèche if they are unwell.</li> <li>• This is an allergy-aware facility, and I will not bring nuts into the centre or any other foods as described in the Crèche Parenting Handbook.</li> <li>• I am responsible, at all times, for my child/children while they attend the crèche.</li> <li>• I must immediately return to the crèche area to attend to my child/children should I be requested.</li> <li>• I will not be late to collect my child/children from the crèche, and a fine may apply.</li> <li>• My child/children are recommended to be immunised before using crèche facilities.</li> <li>• I authorise the obtaining of medical or hospital treatment for my child/children as required and agree to cover any related expenses.</li> <li>• In case of emergency, I consent to my child/children being transported by ambulance. I understand I will be consulted where possible</li> </ul>	
Comments	
Signature of parent/guardian	Date / /

<p>Office use only</p> <p>Scanned <input type="checkbox"/> Enrolled PG <input type="checkbox"/> Linked to both parents <input type="checkbox"/> Account activated email with parent handbook <input type="checkbox"/> Medical <input type="checkbox"/> Added to contact list <input type="checkbox"/></p> <p>Email records <input type="checkbox"/> Upload to Synergy <input type="checkbox"/> Record Number _____</p> <p>Archived Date: ___/___/___</p> <p><input type="checkbox"/> Removed from allergy list</p> <p><input type="checkbox"/> Removed from contact sheet</p> <p><input type="checkbox"/> Form put into archive box</p> <p style="text-align: right;">Updated date: / / Parent Initial</p> <p style="text-align: center;"><a href="https://porthedland-my.sharepoint.com/personal/19371_porthedland_wa_gov_au/Documents/Desktop/Crèche%20Enrolment%20Form.docx">https://porthedland-my.sharepoint.com/personal/19371_porthedland_wa_gov_au/Documents/Desktop/Crèche Enrolment Form.docx</a></p>
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